TRANSMITTAL FORM		Application Number Filing Date First Named Inventor Art Unit	09/865,24 May 25, 20	
(to be used for all correspondence after initial filing)		Examiner Name Attorney Docket Number	FUBARA,	Blessing M.
Total Number of Pages in This Submission			17.007.00	
	ENC	LOSURES (Check al	l that apply	
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on C	Address	After Allowance Communication to To Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Issue Fee Transmittal and Return Postcard
	TURE C	F APPLICANT, ATTO	RNEY, C	OR AGENT
Firm Name Medtronic Vascular, Inc.				
Signature Wind 1—				
Printed name Michael J. Jaro				
Date December 14, 2004	December 14, 2004 Reg. No. 34,4			34,472
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Application Number	09/865,242		
Filing Date	May 25, 2001		
First Named Inventor	FITZHUGH, Anthony L.		
Art Unit	1615		
Examiner Name	FUBARA, Blessing M.		
Attorney Docket Number	PA397 CON1		

I hereby revoke all previous powers of attorney given in the above-identified application.					
A Power of Attorney is submitted herewith.					
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Please change the correspondence address for the above-identified application to:					
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Applicant/Inventor.					
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
SIGNATURE of Applicant or Assignee of Record					
Signature Will 1					
Name Michael J. Jaro					
Date December 14, 2004	Telephone (707) 566-1746				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					
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